

KENT COUNTY FRIEND OF THE COURT	DIRECT PAYMENT CREDIT REQUEST	DOCKET NO:
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Plaintiff's name: This person pays support OR This person receives support	Defendant's name: This person pays support OR This person receives support
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I received support payment(s) directly from the payer on my case, and I am requesting a credit to the arrears owed by the payer on my case.

I received a total of \$ _____ directly from the payer.

Printed Name	Signature	Date
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*****Please note that you must attach a copy of your driver's license or state ID with this form or you must have your signature notarized in order for credit to be given on your case.*****

Subscribed and sworn to before me, a Notary Public, _____ on _____

Signature	Date
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